

# **MATERNITY CARE PROGRAM**

## **Non Clinical Focused Study**

### **January 1, 2006 – March 31, 2006**

#### **1. Study Topic: Late Entry into Care**

The purpose of this study is to determine cause(s) for late entry into care. Late entry into care is defined as the beginning of prenatal care with a delivering healthcare professional (DHCP) that is at or beyond 14.0 weeks of gestational age.

#### **2. Study Questions:**

Data will be collected from each patient about her Medicaid eligibility, start date, provider requirements and her perception as to why she began care at 14 weeks or later.

1. The delivering healthcare professional (DHCP) requiring Medicaid eligibility for first prenatal visit?
2. The DHCP requiring enrollment in Maternity Care Program prior to first prenatal visit?
3. Educational level?
4. Lack of knowledge re program enrollment?
5. Patient perception of barriers:
  - School
  - Transportation
  - Work
  - Substance Abuse
  - Did not know pregnant
  - Embarrassment
  - Fear
  - Did not need doctor
  - Waiting on Medicaid eligibility
  - Other

#### **3. Study Indicators:**

The answers to the above questions will be analyzed based the indicators in 2.5.

Women entered care late because:

- Was in school
- Lack of Transportation
- Could not get off work
- Substance Abuse
- Did not know pregnant
- Embarrassment/did not want others to know
- Fear of being pregnant
- Did not need doctor due to past births (been there/done that mentality)
- Waiting on Medicaid eligibility
- Other

#### **4. Study Population**

All women beginning prenatal care at gestational age that is at or beyond 14.0 weeks between 01/01/06 and 03/31/06.

## **5. Sampling Technique**

The Focus Study Questionnaire on Late Entry Into Care will be administered by the care coordinator at the initial care coordination visit.

## **6. Data Collection:**

<b>Data Source</b>	<b>Collection Method</b>	<b>Collection Instrument</b>	<b>Responsible Party</b>
1. Recipient Medical Record	Information obtained documented findings	Focus Study Questionnaire	Care Coordinator or Designee
2. Focus Study Questionnaire	Interview at time of enrollment	Focus Study Questionnaire	Care Coordinator or Designee

1. Care Coordinator or Primary Contractor shall obtain the gestational age of entry into prenatal care from the recipient's medical record. The earliest gestational age of entry into prenatal care, regardless of the provider, i.e., out-of-district provider or in-district provider shall be used.
2. At the recipient's initial/enrollment visit, the Care Coordinator shall interview all recipients who enter care with DHCP at or after 14.0 weeks gestation to determine what barriers may contribute to late entry into care. Interview information shall be collected on the Focus Study Questionnaire.

## **Data Analysis Plan:**

1. Data will be collected on stated study population using sources, methods, and instruments stated above.
2. Utilizing the Focus Study Questionnaire, specific patient information will be collected. The survey should be administered orally and the information collected by the Care Coordinator or designee. All findings from individual surveys should be recorded accurately and clearly on the standardized Excel Spreadsheet.
3. Detailed findings will be retained by the Primary Contractor.
4. Aggregate information will be provided on the standardized Excel Spreadsheet and submitted to Carolyn Patterson at the Alabama Medicaid Agency: [cpatterson@medicaid.state.al.us](mailto:cpatterson@medicaid.state.al.us). This will report percentages for each reason indicated as a reason. All parties should be cognizant that the reason for late entry may be multi-faceted.

## **7. Analyze Data and Interpret Study Results:**

1. Findings will be utilized in establishing performance improvement activities and assessed for program's ability to remove barriers to decrease late entry into care percentages.
2. Action should be initiated to address those barriers or reasons which are within the District's realm of responsibility to impact. The action necessary will be appropriate to study findings. The State will be monitoring to ensure that findings are acted upon in upcoming QA activities.
3. Each Primary Contractor should take the findings for the focused study and implement a Performance Improvement Project (PIP) to address the findings. Keep in mind that the purpose of the PIP is to implement action(s) to affect a change and to measure the impact of the action.
4. A second focus study will be conducted as a follow-up to the initial study using same population to determine effects of late entry into care. The details will be provided at a later date but will take this population and determine birth outcome.

The final report is due by May 1, 2006.

Note: For further information regarding Focused Study activities refer to the CMS protocols for conducting Focused Studies of Healthcare quality at:

<http://www.cms.hhs.gov/medicaid/managedcare/mceqrhmp.asp>